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FACSIMILE COVER SHEET

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| To: Mr. Navin Natnithithadha Company: USPTO Art Unit 3736 Fax: 7038729306 | From: Kao H. Lu, Esquire Lu & Associates, P.C. 686 Lawson Ave., Havertown, PA 19083 Tel: 610-446-5886 Fax: 610-446-8841 kaohlu@hotmail.com |
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Date: 12/14/2004

Total Page(s): 8

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MESSAGE:

Reply for patent application 10,697,298

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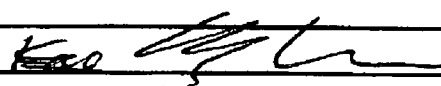
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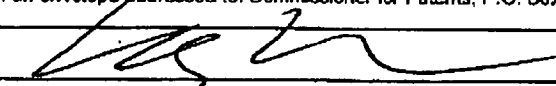
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| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 10/697298 |
| | Filing Date | 10/31/2003 |
| | First Named Inventor | Chi Ngoc Phuong Nguyen |
| | Art Unit | 3736 |
| | Examiner Name | Nathithithadha, Navin |
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| ENCLOSURES (Check all that apply) | | |
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| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): |
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